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RUE
10/28/14

South Carolina Lieutenant Governor - Office on Aging Services

2015 Payment Request Form
07/1/2014 through 6/30/2015

Payment Request #: 3
YTD Expenses through: 9/30/14
Final Print? NO

Area Agency on Aging Multi-Program Contract Reimbursements
Agency Name: Waccamaw Council of Governments
Document Number: R8 MG15
Vendor Number: 700025942

Prepared by: Kimberly Harmon

Functional Area	Grant Name	Source of Funds	Award	Reimbursed	YTD FY15 Expenses 7/1/2014 through 9/30/14	Total of All Previous FY15 Requests	Amount FY15 Requested this Period	Federal (F) Share Required	State (S) Share Required	Local (L) Share Contributed	Revised Current	Award Balance (a) - (b) - (c)
4B10	SIIB13	III-B - Supportive Services Contracted-FLUS (Auth in AIM)	\$6,485.00 ✓	\$0.00	\$6,485.00 ✓	\$6,485.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4B10	SIIB14	III-B - Supportive Services Contracted-FLUS (Auth in AIM)	\$433,914.00 ✓	\$0.00	\$50,506.00 ✓	\$31,950.00	\$18,556.00	\$15,773.00	\$928.00	\$1,856.00	\$393,408.00	\$0.00
4B10	SIIB13	III-B - Legal Services	\$9,182.00 ✓	\$0.00	\$575.00 ✓	\$575.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,607.00	\$0.00
4B10	SIIB14	III-B - Legal Services	\$18,629.00 ✓	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$18,629.00	\$0.00
4B20	IIIC13	III-C-1 - Group Dining - FLUS	\$23,303.00 ✓	\$0.00	\$23,303.00 ✓	\$23,303.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4B20	IIIC14	III-C-1 - Group Dining - FLUS	\$324,654.00 ✓	\$0.00	\$51,858.00 ✓	\$27,304.00	\$24,554.00	\$20,871.00	\$1,228.00	\$2,455.00	\$272,796.00	\$0.00
4B30	IIIC23	III-C-2 - Home Delivered Meals FLUS	\$53,885.00 ✓	\$0.00	\$53,885.00 ✓	\$46,167.00	\$7,718.00	\$6,560.00	\$386.00	\$772.00	\$0.00	\$0.00
4B30	IIIC24	III-C-2 - Home Delivered Meals FLUS	\$389,708.00 ✓	\$0.00	\$14,982.00 ✓	\$0.00	\$14,982.00	\$12,718.00	\$748.00	\$1,496.00	\$385,746.00	\$0.00
4B32	SIID12	III-D Evidence-Based Wellness Programs FLUS	\$215.79 ✓	\$0.00	\$215.79 ✓	\$215.79	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4B32	SIID13	III-D Evidence-Based Wellness Programs FLUS	\$4,701.00 ✓	\$0.00	\$3,341.00 ✓	\$1,367.00	\$1,974.00	\$1,678.00	\$99.00	\$197.00	\$1,360.00	\$0.00
4B32	SIID14	III-D Evidence-Based Wellness Programs FLUS	\$28,581.00 ✓	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$28,581.00	\$0.00
4B45	SIIE12	III-E Family Caregiver Services (Auth in AIM) - F	\$34,758.75 ✓	\$0.00	\$9,131.00 ✓	\$2,670.00 ✓	\$6,461.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4B45	SIIE13	III-E Family Caregiver Services (Auth in AIM) - F	\$104,550.00 ✓	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4B45	SIIE14	III-E Family Caregiver Services (Auth in AIM) - F	\$120,394.00 ✓	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5B65	SNIP14	NSIP	\$159,250.00 ✓	\$0.00	\$48,259.00 ✓	\$32,485.00	\$15,774.00	\$14,197.00	\$40,611.00	\$4,572.00	\$110,991.00	\$0.00
X2J11	10010000	HCBBS-State	\$755,159.00 ✓	\$0.00	\$137,855.00 ✓	\$92,732.00	\$45,123.00	\$40,611.00	\$3,932.00	\$437.00	\$617,304.00	\$0.00
3B90	31270000	ACE - Bingo - Other	\$54,712.11 ✓	\$0.00	\$11,700.00 ✓	\$7,331.00	\$4,369.00	\$0.00	\$0.00	\$0.00	\$43,012.11	\$0.00
2B84	10010000	Respite State - Nonrecurring FY14	\$263,627.00 ✓	\$0.00	\$1,894.00 ✓	\$1,065.00	\$829.00	\$0.00	\$0.00	\$0.00	\$261,733.00	\$0.00
3B84	30350000	Abzheimer's Association - Respite	\$94,398.00 ✓	\$0.00	\$21,104.00 ✓	\$9,826.00	\$11,278.00	\$0.00	\$0.00	\$0.00	\$63,294.00	\$0.00
TOTALS SFY 2015 (FY14)			\$2,861,106.65	\$0.00	\$435,073.79	\$283,475.79	\$151,596.00	\$78,258.00	\$60,039.00	\$13,302.00	\$2,426,032.86	\$0.00

Under the penalties for perjury under State Law, I certify that this report is accurate and complete to the best of my knowledge and belief. It requests reimbursement only for the period covered by this payment request and only for contractors that have electronically replicated data with all information required by the LGOA.

Signature: *Kimberly Harmon*
Executive Director
Date: 9/20/14
Phone: 843-546-8502

* per NGA signed on 10/17/14